

**STRUCTURAL PEST CONTROL BOARD**

1418 HOWE AVENUE, SACRAMENTO, CA 95825

Telephone Numbers:

Examination/Licensing /Records Storage (916) 263-2544

FAX (916) 263-2469

www.dca.ca.gov/pestboard

**FOR BOARD USE ONLY****NOTICE OF TRANSFER OF EMPLOYMENT**

(To be filed by licensee)

| | |
|----------------|------------|
| Effective Date | Checked by |
| License No. | |

In accordance with Section 8567 of the Structural Pest Control Act, when a field representative or applicator changes his/her employment or an operator enters the employ of a registered company, the licensee shall notify the Structural Pest Control Board within 10 days of such change. To notify the Board of a transfer of employment, complete this Notice of Transfer of Employment and send to the Board. There is no fee for a Transfer of Employment. Do not send your license to the Board.

PLEASE PRINT OR TYPE

| | |
|---|-------------------------------|
| Name of Licensee | License Number(s) |
| Residence Address | Telephone Number |
| (City) (State) (Zip Code) | Area Code () |
| Signature of Licensee | Date |
| Please indicate which address you wish to use for mailing purposes: | |
| Residence | Business |
| FORMER EMPLOYER | Date left |
| Principal Office Address | Principle Registration Number |
| (City) (State) (Zip Code) | |
| NEW EMPLOYER | Date employed |
| Principal Office Address | Principle Registration Number |
| (City) (State) (Zip Code) | |
| Signature of New Employer | Date |